Attorney Docket No.

## Declaration and Power of Attorney For Patent Application (Sole/Joint)

As a below named inventor, I hereby declare that:

the specification of which (Check One)

My residence, post office address and citizenship are as stated below next to my name,

Knitting method of tubular knitted fabric with projection, and Tubular knitted fabric with projection

I verily believe I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought, on the invention entitled

is attached hereto.			
OR			
x was filed on Octo	ober 7, 2004		as
	Application Serial No.		
[x]	International Application	n No. <u>PCT/</u> JP2004/014838	
and was amended of	on		<u>_</u> .
I hereby state that I have reviewed amended by any amendment reference		ntents of the above-identified	d specification, including the claims, as
	s, material information w	hich became available betwe	efined in 37 CFR 1.56, including for the filing date of the prior application and
plant breeders rights certificate( the United States of America, lis	s), or 365(a) of any PCT sted below and have also any PCT application hav	international application whi dentified below any foreign	oreign application(s) for patent, inventors or ich designated at least one country other than application for patent, inventor's or plant of the application on which priority is
			Priority Claimed
2003-353019	Japan	10 October 2003	Yes: X No:
(Number)	(Country)	(Day/Month/Year Filed	0
			Yes; No:
(Number)	(Country)	(Day/Month/Year File	
(Number)	(Country)	(Day/Month/Year Filed	Yes: No:
(Number)	(Country)	(Баугмоний Геаг Г нес	,
I hereby claim the benefit under	35 U.S.C. 119(e) of any	United States provisional ap	plication(s) listed below:
APPLICATION NUMBER: _	<del></del> -	FILING DATE	:
APPLICATION NUMBER: _		FILING DATE	
			er 6449 to prosecute this application and to
	t and Trademark Office	connected therewith. Direct	all correspondence about the application to
Customer Number 6449.			

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

such willful false statements may jeopardize the validity of the application or any patent issuing thereon.								
Name of Sole or First Inventor	A petition has been filed for this unsignd inventor.							
Given Name (first and middle[if any]) Masao	Family Name or Surname OKUNO							
Inventor-s Signature Masao Okuno	Date March 13, 2006							
Residence (City, State, Country) Wakayama-shi, Wakayama Japan	Citizenship Japan							
Mailing Address (Street, City, State, Zip or Postal Code, Country)  C/O SHIMA SEIKI MFG., LTD. 85, Sakata, Wakayama-shi, Wakayama 641-8511 Japan								
Name of Second Inventor	A petition has been filed for this unsignd inventor.							
Given Name (first and middle[if any]}	Family Name or Surname							
Inventor-s Signature	Date							
Residence (City, State, Country)	Citizenship							
Mailing Address (Street, City, State, Zip or Postal Code, Country)								
Name of Third Inventor	A petition has been filed for this unsignd inventor.							
Given Name (first and middle[if any]}	Family Name or Surname							
Inventor-s Signature	Date							
Residence (City, State, Country)	Citizenship							
Mailing Address (Street, City, State, Zip or Postal Code, Country)								
Name of Fourth Inventor	A petition has been filed for this unsignd inventor.							
	A petition has been filed for this unsigna inventor.							
Given Name (first and middle[if any]}	Family Name or Surname							
Given Name (first and middle[if any])  Inventor-s Signature								

Mailing Address (Street, City, State, Zip or Postal Code, Country)									
1									

Patent Application Declaration

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